



Town of East Longmeadow Council on Aging



328 North Main Street, East Longmeadow, MA 01028
413-525-5436 (Main Office) Fax: 413-526-9746

Carolyn Brennan
Executive Director

Fitness Center Application for Utilization of Exercise Equipment and Assumption of Risk Form

I wish to use the East Longmeadow Council on Aging Fitness Center. I understand that there are health risks associated with exercise. Possible injuries or medical disorders, arising out of my use of the fitness center, such as (but not limited to) heart attack, stroke, sprain, broken bones, torn muscles or ligaments, and in rare instances cardiac arrest can occur. Knowing of these risks, I nonetheless request to participate in the fitness center and assume all the risks associated with my use of the fitness equipment. This does not guarantee against any of the described risks actually occurring in my case. I certify that I have carefully read this form before signing it. I also certify that I have had the opportunity to ask questions about the fitness equipment and the associated risks. I have been adequately trained to use the equipment. All my questions have been answered to my satisfaction. I understand that I am free to ask any additional questions that I may have later.

Name (print) _____ Date _____

Signature _____

Witness _____ Date _____

Date of training _____ Trainer _____

Updated 5/10/10